

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

0981158

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                |                          |
|----------------------------------|----------------|--------------------------|
| TOTAL CLAIMS                     | 3              |                          |
| FOR                              | NUMBER FILED   | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 3 minus 20 = 0 |                          |
| INDEPENDENT CLAIMS               | 2 minus 3 = 0  |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |                | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE 

| RATE      | FEES   |
|-----------|--------|
| BASIC FEE | 355.00 |
| X\$ 9=    |        |
| X40=      |        |
| +135=     |        |
| TOTAL     |        |

OTHER THAN  
OR SMALL ENTITY

| RATE      | FEES   |
|-----------|--------|
| BASIC FEE | 710.00 |
| X\$18=    |        |
| X80=      |        |
| +270=     |        |
| TOTAL     | 710.00 |

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |     |
|---|---|---|------------------|-----|
|   |   |   | MINUS            | =   |
| Total   | 3   | Minus                                       | 3                | = 1 |
| Independent   | 2   | Minus                                       | 2                | = 1 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |   |                  |     |

SMALL ENTITY OR OTHER THAN  
OR SMALL ENTITY

| RATE             | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|
| X\$ 9=           |                        |
| X40=             |                        |
| +135=            |                        |
| TOTAL ADDIT. FEE |                        |

| AMENDMENT B   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|---|---|---|------------------|---|
|   |   |   | MINUS            | = |
| Total   | Minus                                     | **  | =                |   |
| Independent   | Minus                                     | ***   | =                |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |   |                  |   |

| RATE             | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|
| X\$ 9=           |                        |
| X40=             |                        |
| +135=            |                        |
| TOTAL ADDIT. FEE |                        |

| AMENDMENT C   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |   |
|---|---|---|------------------|---|
|   |   |   | MINUS            | = |
| Total   | Minus                                     | **  | =                |   |
| Independent   | Minus                                     | ***   | =                |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |   |                  |   |

| RATE             | ADDI-<br>TIONAL<br>FEE |
|------------------|------------------------|
| X\$ 9=           |                        |
| X40=             |                        |
| +135=            |                        |
| TOTAL ADDIT. FEE |                        |

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- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid  
Total or Independent) is the highest number found in the  
appropriate box in column 1.